

2017 Mellon Sisters Race Against Violence

Saturday, October 14, 2017

Date & Time: *The Race Against Violence* will be held Saturday, October 14, 2017. Registration will begin at 7:30am, with the Fun Run getting underway at 8:30am and the 5K race beginning at 9:00am.

About the Race: The purpose of this event is to raise money for the *Dubuque/Delaware Coalition Against Domestic Violence Victim Assistance Fund*. This fund provides immediate financial support to victims and their children not available from other agencies in our community.

Location: The *Race Against Violence* will be held on Heritage Trail, starting at Heritage Pond, located off Rupp Hollow Road.

Awards: All Fun Run participants will receive an award. Awards in the 5K race will be given to the first, second and third place male and female in the following categories:

10 and under, 11–15, 16–25, 26–35, 36–45, 46–55, 56 and over

Team Prize: The team with the most participants will be awarded the *Kelly Francois Traveling Trophy*.

Registration Fee: *Registration deadline is 10.06.17.*

Please help us fill the *New Beginnings* Domestic Violence Shelter's van with much needed supplies: toilet paper, paper towels, garbage bags, and laundry soap.

Adults: \$25.00 Includes a long-sleeve sweatwicking shirt.

Children: \$10.00 (10 and under) Includes a T-shirt.

After October 6: Adults: \$30.00; Children (10 and under): \$15.00

Shirts only guaranteed to those registered by October 6.

Online registration available at getmeregistered.com

Please fill in completely.

Name: _____

Gender: M F **Race:** Fun Run 5K
(Circle one.) (Circle one.)

Team Name: _____

Phone: _____

(Must be filled in to qualify for team prize.)

Address, City, State, Zip: _____

Date of Birth: _____ **E-mail:** _____

Shirt Size: (men's sizes): YS YM YL S M L XL XXL XXXL **Amount Enclosed: \$** _____

I would like to make a donation and receive a shirt, but will not attend the event.

Please Read and Sign the Following Waiver:

*I recognize the risks involved in any athletic event and hereby waive and hold harmless the **Dubuque/Delaware Coalition Against Domestic Violence**, as well as **Dubuque County** and all their members, all sponsors, and all race directors and volunteers, from any and all liability, claims, and rights for damages from injuries growing out of, related to, or arising from participating in the **Race Against Violence**. I further hereby certify that I have full knowledge of the risks involved in this event and I am physically fit to participate. If, however, as a result of my participation in the *Race Against Violence*, I receive medical attention, I hereby give my consent to authorized medical personnel to provide such medical care as is deemed necessary by such medical personnel.*

Signature: _____ Date: _____

Parent Signature if Under 18: _____

Send completed registration form and payment (checks payable to DDCADV) to
Holly Elliott, Dubuque County Attorney's Office, 720 Central Ave., Dubuque, IA 52001.